

STATE OF WASHINGTON

WASHINGTON STATE BOARD OF HEALTH

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News Release

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Board of Health to hear testimony on reducing health disparities by increasing the diversity of Washington's health-care workforce

May 9, 8:45 a.m.-5 p.m., 701 S 37th Street, Lincoln High School, Tacoma

OLYMPIA – In Washington state, Native Americans and African Americans are more than twice as likely to die during infancy as Caucasians. African Americans are more than three times as likely to die from HIV/AIDS and diabetes. Asian Americans are 15 times more likely to die from tuberculosis. Native Americans are twice as likely to die from cervical cancer and asthma.

At its May 9 meeting at Lincoln High School in Tacoma, the Washington State Board of Health will consider findings and recommendations contained in a new report from the Board's Subcommittee on Health Disparities. The report focuses on ways to increase the number of minorities in the health-care workforce. A growing body of research shows that a diverse workforce can improve the health of racial and ethnic minorities. Just as female health providers have increased the quality, accessibility, and responsiveness of our health-care system for women and girls, health-care professionals who share a common language and/or racial and ethnic background with their patients are likely to provide better health care for those patients. Minority practitioners are also five times more likely to provide care to poor and underserved patients, and they are more likely to practice in underserved areas.

"The board is very concerned that people of color are much more likely to become sick or die from a whole host of diseases," said Joe Finkbonner, a board member who served on the Health Disparities Subcommittee. "A lot of organizations are working to reduce health disparities, but it is clear that workforce diversity deserves more attention."

The subcommittee documented a significant gap between the number of people of color currently in the health professions in Washington and the number that would be needed if the workforce were to reflect the ethnic and racial composition of the state's population. That gap is even larger when a minority groups' disproportionate disease burden is calculated. The subcommittee also found that the academic and career development "pipeline" that begins in kindergarten, flows through the educational system and ends

with professional licensing is inadequate. A student of color who enters the pipeline in kindergarten is only half as likely as a Caucasian student to emerge from the other end as a nurse, physician assistant or physician.

The board will hear more than six hours of testimony, most of which will focus on programs designed to prepare students of color for post-secondary education and to recruit minorities into the health professions. The board will hear from Tacoma and Pierce County government leaders, representatives of education agencies and colleges, local public health officials, administrators of academic enrichment and development programs, and students and alumni from those programs.

"We do not generate enough minority health-care professionals," said Lyle Quasim, chief of staff for the Pierce County Executive, who will be one of several officials welcoming the State Board of Health to Tacoma. "Minorities are not treated in health care systems in numbers that would be equal to our numbers in the population."

Quasim, who serves on the Tacoma-Pierce County Board of Health, added, "Tacoma has one of the highest minority populations in the state on a per capita basis. Lincoln High School is one of the most diverse schools in Pierce County. It seemed like a good venue for discussing the health disparities issue. We also are inviting minority health practitioners and minority people to come to Lincoln High for lunch to chat with students about how to make it through the system and how to get into the health-care professions."

The State Board of Health will also consider the subcommittee's recommendations for increasing minority participation in the health-care workforce by recruiting and retaining students of color at all points through the pipeline. Those recommendations include better data collection, the establishment of best practice guidelines for programs, new assessment tools, leveraging of existing training dollars, and the creating of a statewide coordinating group.

"We don't want to take anything away from the tremendous work that's already being done," said Vickie Ybarra, a member of the board, "but the subcommittee believes that existing programs can be expanded, enhanced and better coordinated."

Copies of the agenda, the executive summary of the report, and related materials are available by contacting the Board of Health or by visiting the board's Web site at http://www.doh.wa.gov/sboh/.

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The State Board of Health is composed of 10 members appointed by the Governor to represent the people of the State. The Board's mission is to develop policies to promote, protect, maintain, and improve the health of Washingtonians. Visit the Board's website at www.doh.wa.gov/sboh.